

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	MM	10591D	9/28
O.I.P.E. CLASSIFIER		19	
FORMALITY REVIEW	WW	67479	6/12 W
RESPONSE FORMALITY REVIEW	WW	67479	11-22-61

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 — (Through numeral)... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	
Original	
1	2/13/61
2	10/6/57
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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